



OFF-CAMPUS SKILLS BUILDING INCENTIVE PROGRAM SCREENING / APPROVAL REQUEST

☐ BCCY ☐ JCY ☐ SCY

Referral by Education/Skills Building Incentive Program Multi-Disciplinary Team

Youth: _____ Client ID# _____ DOB: _____
 Intake Date: _____ Facility: _____ Dorm: _____ Custody Level: _____
 Full-Term Date: _____ Committing Court: _____
 Judge(s): _____
 Estimated Program Completion Date: _____
 Committing Offense(s): _____
 Amount of Time at Facility: _____ % of Sentence Served: _____ (897.1 only)
 Crime Victim Notification (La. Ch. C. Art. 897.1) ☐ Yes ☐ No
 Pending Charges / Detainer: ☐ Yes ☐ No
 Escape History: _____

PC SCREENING

- ☐ Yes ☐ No Has youth obtained a GED or High School Diploma?
- ☐ Yes ☐ No If youth is under the age of 18, has written permission been obtained from a parent/guardian for youth to participate in the program?
- ☐ Yes ☐ No Has the youth been screened for possible security risk?
- ☐ Yes ☐ No Has the youth expressed an interest in the type of work this job entails?
 If yes: ☐ High ☐ Medium ☐ Low
- ☐ Yes ☐ No If the youth is under the age of 16, will he be working no more than 8 hours per day or 48 hours per week?
- ☐ Yes ☐ No If the youth is a minor, have the policy work prohibitions been reviewed with the worksite supervisor to insure compliance with La. R.S. 23:241?
- ☐ Yes ☐ No Have youth reports submitted by the PC been reviewed by all Team members?
- ☐ Yes ☐ No Have youth and worksite supervisor been advised of all security measures, including the use of the GPS for tracking and monitoring purposes?
- ☐ Yes ☐ No Has the youth completed the one-hour class in Life Skills instruction prior to employment?

November 2013

Comments:

***Education/Skills Building Incentive Program Multi-Disciplinary Team
Approval / Disapproval***

<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	_____	_____
		Facility Director	Date
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	_____	_____
		Principal/Asst. Principal	Date
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	_____	_____
		Program Coordinator	Date
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	_____	_____
		SSD Regional Coordinator	Date
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	_____	_____
		Youth's PPO/J	Date
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	_____	_____
		Group Leader	Date
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	_____	_____
		Youth's assigned Case Manager	Date

YS Deputy Secretary Approval for Off-Campus Skills Building Incentive Program

☐ Approved ☐ Denied

YS Deputy Secretary

Date

897.1 - District Attorney Approval for Off-Campus Skills Building Incentive Program

☐ Approved ☐ Denied

District Attorney

Date
November 2013

897.1 - Sentencing Judge Approval for Off-Campus Skills Building Incentive Program

☐ Approved ☐ Denied

Judge

Date

Sex Offender Bureau Notification Completed 48 Hours prior to Off-Campus Skills Building Incentive Program Assignment

☐ Approved ☐ Denied

Central Office Furlough Coordinator

Date

Original to: Program Coordinator

Copies to: Program Board
 Youth Portfolio